

Attorney Docket: RPS920010037US1/2132P

CERTIFICATE OF MAIL -

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on August 17, 2004.

  
Saundra D. Hunter

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Date: August 17, 2004

**RECEIVED**

Travis BALDWIN et al.

Confirmation No. 3697

AUG 26 2004

Serial No: 09/924,877

Group Art Unit: 2675 Technology Center 2600

Filed: August 8, 2001

Examiner: Chow, Doon Y.

For: ADJUSTABLE DISPLAY DEVICE

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

RESPONSE AFTER FINAL

Sir:

In response to the Final Office Action dated June 23, 2004, please enter the following remarks in the present application.

**Amendments to the Claims** are reflected in the listing of claims, which begin on page 2 of this paper.

**Remarks/Arguments** begin on page 8 of this paper.

AUG 25 2004  
PATENT & TRADEMARK OFFICE  
52188

TRANSMITTAL FORM

Attorney Docket No.  
RPS920010037US1  
2132P

API  
2675  
61

In re the application

BALDWIN

Confirmation 3697

Serial No: 09/924,877

Group Art Unit: 2675

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Filed: August 8, 2001

Examiner: Chow, Doon Y.

AUG 26 2004

For: Adjustable Display Device

Technology Center 2600

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/>	Amendment/Reply	<input type="checkbox"/>	Assignment and Recordation Cover Sheet	<input type="checkbox"/>	After Allowance Communication to Group		
<input type="checkbox"/>	<input checked="" type="checkbox"/> After Final	<input type="checkbox"/>	Part B-Issue Fee Transmittal	<input type="checkbox"/>	Appeal Communication to Board of Appeals and Interferences		
<input type="checkbox"/>	Information disclosure statement	<input type="checkbox"/>	Letter to Draftsman	<input type="checkbox"/>	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)		
<input type="checkbox"/>	Form 1449	<input type="checkbox"/>	Drawings	<input type="checkbox"/>	Status Letter		
<input type="checkbox"/>	(X) Copies of References	<input type="checkbox"/>	Petition	<input checked="" type="checkbox"/>	Postcard		
<input type="checkbox"/>	Extension of Time Request *	<input type="checkbox"/>	Fee Address Indication Form	<input type="checkbox"/>	Other Enclosure(s) (please identify below):		
<input type="checkbox"/>	Express Abandonment	<input type="checkbox"/>	Terminal Disclaimer				
<input type="checkbox"/>	Certified Copy of Priority Doc	<input type="checkbox"/>	Power of Attorney and Revocation of Prior Powers				
<input type="checkbox"/>	Response to Incomplete Appln	<input type="checkbox"/>	Change of Correspondence Address				
<input type="checkbox"/>	Response to Missing Parts	*Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for xxxxx month(s), from _____ to _____.					
<input type="checkbox"/>	<input type="checkbox"/> Executed Declaration by Inventor(s)						

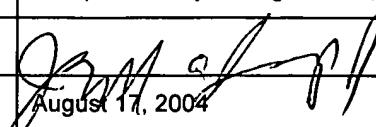
CLAIMS

FOR	Claims Remaining After Amendment	Highest # of Claims Previously Paid For	Extra Claims	RATE	FEE
Total Claims	27	28	0	\$18.00	\$ 0.00
Independent Claims	4	5	0	\$86.00	\$ 0.00
				Total Fees	\$ 0.00

METHOD OF PAYMENT

<input type="checkbox"/>	Check no. _____ in the amount of \$ _____ is enclosed for payment of fees.
<input type="checkbox"/>	Charge \$ _____ to Deposit Account No. _____ (Account Holder Name) for payment of fees.
<input checked="" type="checkbox"/>	Charge any additional fees or credit any overpayment to Deposit Account No. 50-0563 (IBM Corporation)

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Attorney Name	Joseph A. Sawyer, Reg. No. 30,801
Signature	
Date	August 17, 2004

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Type or printed name	Saundra D. Hunter
Signature	